# Exhibit A

for the

	)	
Plaintiff	) Orivil Action No.	
V.	) Civii Action No.	
Defendant	)	
WAIVER OF THE	SERVICE OF SUMMONS	
To:		
(Name of the plaintiff's attorney or unrepresented plaint	iff)	
I have received your request to waive service of a two copies of this waiver form, and a prepaid means of re	a summons in this action along with a copy of the complaint, eturning one signed copy of the form to you.	
I, or the entity I represent, agree to save the expe	nse of serving a summons and complaint in this case.	
	vill keep all defenses or objections to the lawsuit, the court's any objections to the absence of a summons or of service.	
	must file and serve an answer or a motion under Rule 12 within when this request was sent (or 90 days if it was sent outside the be entered against me or the entity I represent.	
Date:		
	Signature of the attorney or unrepresented party	
Endo Pharmaceuticals Inc.	Sean O. Morris	
Printed name of party waiving service of summons	Printed name Arnold & Porter Kaye Scholer LLP	
	777 S. Figueroa Street, 44th Floor	
	Los Angeles, California 90017	
	Address	
	sean.morris@arnoldporter.com	
	E-mail address	
	(213) 243-4000	
	Telephone number	

### **Duty to Avoid Unnecessary Expenses of Serving a Summons**

Rule 4 of the Federal Rules of Civil Procedure requires certain defendants to cooperate in saving unnecessary expenses of serving a summons and complaint. A defendant who is located in the United States and who fails to return a signed waiver of service requested by a plaintiff located in the United States will be required to pay the expenses of service, unless the defendant shows good cause for the failure.

"Good cause" does *not* include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

for the

	)			
V.	ĺ	Civil Action No.		
Defendant	)			
WAIVER OF THE SERVICE OF SUMMONS				
To:				
(Name of the plaintiff's attorney or unrepresented plainti	iff)	_		
I have received your request to waive service of a two copies of this waiver form, and a prepaid means of re		nons in this action along with a copy of the complaint, g one signed copy of the form to you.		
I, or the entity I represent, agree to save the exper	nse of	serving a summons and complaint in this case.		
I understand that I, or the entity I represent, w jurisdiction, and the venue of the action, but that I waive	ill kee any ob	ep all defenses or objections to the lawsuit, the court's jections to the absence of a summons or of service.		
· · · · · · · · · · · · · · · · · · ·	when tl	ile and serve an answer or a motion under Rule 12 within his request was sent (or 90 days if it was sent outside the cred against me or the entity I represent.		
Date:				
		Signature of the attorney or unrepresented party		
Endo Health Solutions Inc.		Sean O. Morris		
Printed name of party waiving service of summons		Printed name Arnold & Porter Kaye Scholer LLP		
		777 S. Figueroa Street, 44th Floor		
		Los Angeles, California 90017		
		Address		
		sean.morris@arnoldporter.com		
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"Good cause" does *not* include a belief that the lawsuit is groundless, or that it has been brought in an improper venue, or that the court has no jurisdiction over this matter or over the defendant or the defendant's property.

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	)			
V.	)	Civil Action No.		
	ĺ			
Defendant	)			
WAIVER OF THE SERVICE OF SUMMONS				
То:				
(Name of the plaintiff's attorney or unrepresented plaint	iff)			
I have received your request to waive service of a two copies of this waiver form, and a prepaid means of re		mons in this action along with a copy of the complaint, ag one signed copy of the form to you.		
I, or the entity I represent, agree to save the expe	nse of	serving a summons and complaint in this case.		
I understand that I, or the entity I represent, w jurisdiction, and the venue of the action, but that I waive	vill ke any ol	ep all defenses or objections to the lawsuit, the court's ojections to the absence of a summons or of service.		
	when t	file and serve an answer or a motion under Rule 12 within his request was sent (or 90 days if it was sent outside the ered against me or the entity I represent.		
Date:				
		Signature of the attorney or unrepresented party		
Par Pharmaceutical, Inc.		Sean O. Morris		
Printed name of party waiving service of summons		Printed name Arnold & Porter Kaye Scholer LLP		
		777 S. Figueroa Street, 44th Floor		
		Los Angeles, California 90017		
		Address		
		sean.morris@arnoldporter.com		
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If the waiver is signed and returned, you can still make these and all other defenses and objections, but you cannot object to the absence of a summons or of service.

for the

V.	) Orivil Action No.
Defendant	)
WAIVER OF THE	SERVICE OF SUMMONS
To:	
(Name of the plaintiff's attorney or unrepresented plaint	riff)
I have received your request to waive service of a two copies of this waiver form, and a prepaid means of re	a summons in this action along with a copy of the complaint, eturning one signed copy of the form to you.
I, or the entity I represent, agree to save the expe	ense of serving a summons and complaint in this case.
	will keep all defenses or objections to the lawsuit, the court's any objections to the absence of a summons or of service.
I also understand that I, or the entity I represent, 60 days from, the date will United States). If I fail to do so, a default judgment will a	must file and serve an answer or a motion under Rule 12 within when this request was sent (or 90 days if it was sent outside the be entered against me or the entity I represent.
Date:	
	Signature of the attorney or unrepresented party
Par Pharmaceutical Companies, Inc.	Sean O. Morris
Printed name of party waiving service of summons	Printed name Arnold & Porter Kaye Scholer LLP
	777 S. Figueroa Street, 44th Floor
	Los Angeles, California 90017
	Address
	sean.morris@arnoldporter.com
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Plaintiff	)	C' TA C N		
V.	)	Civil Action No.		
Defendant	)			
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To:				
(Name of the plaintiff's attorney or unrepresented plaint	riff)	_		
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I understand that I, or the entity I represent, w jurisdiction, and the venue of the action, but that I waive	vill kee any ob	ep all defenses or objections to the lawsuit, the court's jections to the absence of a summons or of service.		
	when tl	tle and serve an answer or a motion under Rule 12 within his request was sent (or 90 days if it was sent outside the gred against me or the entity I represent.		
Date:				
		Signature of the attorney or unrepresented party		
Generics Bidco I, LLC		Sean O. Morris		
Printed name of party waiving service of summons		Printed name Arnold & Porter Kaye Scholer LLP		
		777 S. Figueroa Street, 44th Floor		
		Los Angeles, California 90017		
		Address		
		sean.morris@arnoldporter.com		
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